



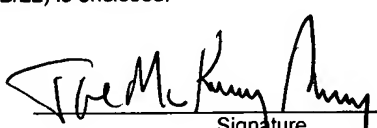
AS/ATW

PTO/SB/31 (07-06)

Approved for use through 09/30/2006. OMB 0651-0031

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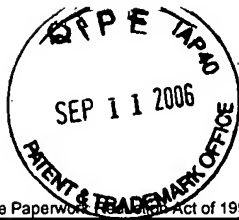
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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 3313-1052P	
In re Application of Rong-Ho LEE et al.			
Application Number 10/699,730-Conf. #6431		Filed November 4, 2003	
For SELF-CHARGING ORGANIC ELECTROLUMINESCENT DISPLAY DEVICE			
Art Unit 2879		Examiner M. P. Hodges	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ 500.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$	
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.			
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
I am the			
<input type="checkbox"/> applicant /inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		 Signature	
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>32,334</u>		Joe McKinney Muncy Typed or printed name	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		(703) 205-8026 Telephone number	
		September 11, 2006 Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input type="checkbox"/> *Total of <u>1</u> forms are submitted.			

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PTO/SB/17 (07-06)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/699,730-Conf. #6431
		Filing Date	November 4, 2003
		First Named Inventor	Rong-Ho LEE
		Examiner Name	M. P. Hodges
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2879
TOTAL AMOUNT OF PAYMENT		(\$)	500.00
		Attorney Docket No.	3313-1052P

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 02-2448
Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
	FILING FEES		SEARCH FEES		EXAMINATION FEES	
		Small Entity		Small Entity		Small Entity
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0
2. EXCESS CLAIM FEES						
					Fee (\$)	Small Entity Fee (\$)
Fee Description						
Each claim over 20 (including Reissues)					50	25
Each independent claim over 3 (including Reissues)					200	100
Multiple dependent claims					360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
4 - 20 =		x	=		Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)		
3 - 3 =		x	=			
HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- 100 =	/50	(round up to a whole number) x		=		
4. OTHER FEE(S)						
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge): 1401 Notice of appeal					500.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	32,334
Telephone	(703) 205-8026		
Name (Print/Type)	Joe McKinney Muncy	Date	September 11, 2006